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MPSERGECOCTION 30 MAY 2006 ACT

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PAGE THE PAI	VEHADIK MEDDECHOIT MCC OF 1999.	no peison	Application Number	10/573,905								
TRANSMITTAL FORM			Filing Date	March 29,	29, 2006							
			First Named Inventor	Michael Brines								
			Art Unit	TBD								
			Examiner Name	TBD								
(to be used for all correspondence after initial filing)			Attorney Docket Number	WP03-1A04-US								
Total Number of Pages in This Submission			1									
ENCLOSURES (Check all that apply)												
	smittal Form		Drawing(s)		After Allowance Communication to TC  Appeal Communication to Board							
Amendme  Aft  Aft  Aft  Extension  Express Aft  Information  Reply to Incompleted Reply to In	ent/Reply  fter Final  ffidavits/declaration(s)  n of Time Request  Abandonment Request  on Disclosure Statement  Copy of Priority  nt(s)  Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Cl	Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):  Copy of Declaration Credit Card Form							
-	SIGNA	TURE (	OF APPLICANT, ATTO	RNEY, C	OR AGENT							
Firm Name Warren Pharmaceuticals,		Inc.										
Signature												
Printed name	Frederick J. Hamble											
Date	May 30, 2006			Reg. No.	42,623							
	С	ERTIFI	CATE OF TRANSMISS	SION/MA	ILING							

## hoing foogimile tempomitted to the LICETO or deposited with the

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Signature

Typed or printed name Frederick J. Hamble

Date May 30, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



EXPRESS MAIL NO.: EQ 203678318 US.

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Brines et al.

Application No.: 10/573,905

Group Art Unit: TBD

Filed: March 29, 2006

Examiner: TBD

For: TISSUE PROTECTIVE CYTOKINES FOR THE

ATTORNEY DOCKET No.:

TREATMENT AND PREVENTION OF SEPSIS

WP03-1A04-US

AND THE FORMATION OF ADHESIONS

## TRANSMITAL OF DECLARATION

MAIL STOP MISSING PARTS Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450

SIR:

Applicant respectfully submits the following documents: (1) a signed Oath or Declaration; (2) a Power of Attorney and Statement Under 37 CFR 3.73(b); and (3) a Fee Transmittal Fee for \$130 for the late filing surcharge.

The Applicant has attached a signed Oath and Declaration for the inventor Osman Yilmaz, as well as, a Power of Attorney signed by Warren Pharmaceuticals, Inc., the assignee. Additionally, the Applicant includes a Fee Transmittal for the surcharge of \$130.

As noted above, Applicant has attached a Fee Transmittal form and a Credit Card Payment form for the payment of the fees and surcharges associated with this filing.

Respectfully submitted,

Date:

May 30, 2006

42 623

Frederick J. Hamble

(Reg. No.)

G1 FD:1817

130.00 CP

Warren Pharmaceuticals, Inc.

712 Kitchawan Road

Irvington, New York 10562

(914) 762-7586 ext. 207

PTO/SB/17 (01-06)

Date May 30, 2006

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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RABEMATE TO the Consolidate		Complete if Known										
to the consolidat	• • •			Application Num	ber 10/	573,90	5					
FEE TR	_	Filing Date	Mai	rch 29,								
For		First Named Inve	entor Mic	hael Br								
Applicant claims small e		Examiner Name	ТВІ	TBD								
		Art Unit	Unit TBD									
TOTAL AMOUNT OF PAYM	ENT (\$)	130,00		Attomey Docket	No. WP	WP03-1A04-US						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: Deposit Account Name:												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments												
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)												
1. BASIC FILING, SEAR	CH, AND E	XAMINATION FE	ES									
	FILING F	EES S	SEAR	CH FEES	EXAMIN							
Application Type	Fee (\$)		ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small E Fee		Fees Paid (\$)				
Utility	300	150	500	250	200	100	)					
Design	200	100	100	50	130	65	;					
Plant	200	100	300	150	160	80	)					
Reissue	300	150	500	250	600	0 300		· · · · · · · · · · · · · · · · · · ·				
Provisional	200	100	0	0	0	C	)					
2. EXCESS CLAIM FEES Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)												
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)												
Other (e.g., late filing surcharge): Late Filing Surcharge \$130												
SUBMITTED BY												
Signature Ihra	19	661.0		Registration No.	2.623		Telephone	914-762-7586				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) Frederick J. Hamble